SEC 1972 Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid (6/99)OMB control number.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2002 Estimated average burden hours per response... 1

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY							
Prefix	Serial						
DATE RECEIVED							
DAT	E KECEI	VED					

Name of Offering (check if this is an amendment and name has changed, and indicate change.)

Lucky 7 Barnett Shale Lease Joint Venture

Filing Under (Check box(es) that apply):

[] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6)

Type of Filing: [ x] New Filing [ ] Amendment

A. BASIC IDENTIFICATION DATA

02058944

1. Enter the information requested about the issuer

Name of Issuer (check if this is an amendment and name has changed, and indiciate change.)

Lexus Energy Group, Inc.

Address of Executive Offices

(Number and Street, City, State, Zip Code)

Telephone Number

(Including Area Code)

14131 Midway Rd., Ste. 800, Addison, TX 75001

972-851-4213

Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)

(if different from Executive Offices)

Same as above

**Brief Description of Business** 

Development, re-entry, operating, managing, and owning oil and gas properties.

PROCESSED

SEP 2 6 2002

THOMSON FINANCIAL

[X] corporation	[ ] limited partnership, a	lready forme	ed [ ] other (please speci	y):		
[ ] business trust [ ] limited partnership, to be formed						
		Month	Year			
Actual or Estimated Date	of Incorporation or Organization:	[0]7] [9	[X] Actual [ ] Estima	ated		
Jurisdiction of Incorporation	on or Organization: (Enter two-lette CN for Canada; FN					

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

## A. BASIC IDENTIFICATION DATA

# 2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[x] Promoter [ ] Beneficial Owner	[ ] Executive Officer	[ ] Director [	] General and/or Managing Partner
Full Name (Last name	first, if individual)			
Lexus Energy Gr	oup			
Business or Residence	Address (Number and Street, C	City, State, Zip Code)		
14131 Midway Rd	l., #800, Addison, TX 7	5001		
	[ ] Promoter [ ] Beneficial Owner		[ ] Director [	] General and/or Managing Partner
Full Name (Last name	first, if individual)			
Pugh, John Joe	1		•	
Business or Residence	Address (Number and Street, C	ity, State, Zip Code)		
14131 Midway R	d., 800, Addison, TX 7	5001		
	[ ] Promoter [ ] Beneficial Owner	[ <sub>X]</sub> Executive Officer	[ ] Director [	] General and/or Managing Partner
Full Name (Last name	first, if individual)			
Wells, Joe A.				
	Address (Number and Street, C	ity, State, Zip Code)		
14131 Midway R	d., Suite 800, Addison,	TX 75001	<del>-</del>	
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[x] Executive Officer	[ ] Director [	] General and/or Managing Partner
Full Name (Last name	first, if individual)		<del></del>	
Freeman, Brook	s M.			
	Address (Number and Street, C	ity, State, Zip Code)		
14131 Midway R	d., Suite 800, Addison,	TX 75001		
Check Box(es) that Apply:		(x) Executive Officer	[ ] Director [	General and/or Managing Partner
Full Name (Last name	first, if individual)			
Business or Residence	Address (Number and Street, C	ity, State, Zip Code)		
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ ] Executive Officer	[ ] Director [	General and/or Managing Partner
Full Name (Last name	first, if individual)			
Business or Residence	Address (Number and Street, C	ity, State, Zip Code)	- 12.00 W. 300	
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ ] Executive Officer	[ ] Director [	General and/or Managing Partner
Full Name (Last name	first, if individual)	•		

Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.) **B. INFORMATION ABOUT OFFERING** 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this Yes No offering?..... [X]Answer also in Appendix, Column 2, if filing under ULOE. **\$** 7500 2. What is the minimum investment that will be accepted from any individual?..... Yes No 3. Does the offering permit joint ownership of a single unit?..... [X][] 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) ..... 1 All States ſ [AL] [AK] [AZ] [AR] [CA] [CO] CT [DE] [FL] [GA] [HI] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [IN] [IA] [NC] [NH] [NJ] [MM] INY [ND] [OH] [OK] [OR] [PA] [MT] [NE] [NV] [VA] [WA] [WV] [W] [WY] [PR] IRII [TN] [TX] [UT] [SC] [SD] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers 1 All States (Check "All States" or check individual States) ..... [AL] [CO] CTI [DE] [DC] [FL] [GA] [HI] [ID] [AK] [AZ] [AR] [CA] [MO] [MD] [MS] [IL] [IN] [IA] [KS] [KY] [ME] [MA] [MI] [MN] [NJ] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [NV] [NH] [MM] [MT] [NE] [PR] [VA] IWVI [W] [WY] M [AW [TN] ITXI ITUI [RI] [SC] [SD] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

1. 1. -10- --- 10- -- 1 Low

Name	of A	Associate	d Brol	keror	Dealer
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States	in Whic	h Persor	Listed I	Has Soli	cited or I	Intends t	o Solicit	Purchase	ers				
(Check "All States" or check individual States) [ ] All States													
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[LN]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$	\$
Equity	\$	\$
[ ] Common [ ] Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	<b>\$</b>
Other (Specify Joint Venture Interests ).	<b>\$</b> 375,000	. \$
Total	\$ 375,000	\$
Answer also in Appendix, Column 3, if filing under ULOE.		

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under <u>Rule 504</u>, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Dollar Amount of Purchases
Accredited Investors	N/A	\$
Non-accredited Investors	_N/A	<u>    \$                                </u>
Total (for filings under Rule 504 only)	N/A	\$ 

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u>, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Dollar Amount Sold
Rule 505		.\$
Regulation A	N/A	\$

Aggregate

	•
Rule 504	\$
Total	375,000 \$
a. Furnish a statement of all expenses in connection with the issuance of distribution of the securities in this offering. Exclude amounts relating lely to organization expenses of the issuer. The information may be wen as subject to future contingencies. If the amount of an expenditure is to known, furnish an estimate and check the box to the left of the	
timate.	
Transfer Agent's Fees	[]\$
Printing and Engraving Costs	[ ]\$
Legal Fees	
Accounting Fees	
Engineering Fees	
Sales Commissions (specify finders' fees separately)	
Other Expenses (identify)	[]\$
Total	[]4
restion 1 and total expenses furnished in response to Part C - Question 4. ference is the "adjusted gross proceeds to the issuer."	a. This \$\frac{370,000}{}{}
ference is the "adjusted gross proceeds to the issuer."	sed or purpose te. The
ference is the "adjusted gross proceeds to the issuer."  Indicate below the amount of the adjusted gross proceeds to the issuer us posed to be used for each of the purposes shown. If the amount for any not known, furnish an estimate and check the box to the left of the estimate.	sed or purpose te. The ssuer
ference is the "adjusted gross proceeds to the issuer."	sed or purpose te. The ssuer
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Indicate below the amount of the adjusted gross proceeds to the issuer us possed to be used for each of the purposes shown. If the amount for any not known, furnish an estimate and check the box to the left of the estimate all of the payments listed must equal the adjusted gross proceeds to the is forth in response to Part C - Question 4.b above.  Salaries and fees  Purchase of real estate  Purchase, rental or leasing and installation of machinery and equipment  Construction or leasing of plant buildings and facilities.  Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	sed or purpose te. The ssuer  Payments to Officers, Payments Directors, & To Affiliates Others  [] [] [] \$\$_[] \$\$_[] \$\$_[] \$\$_[] \$\$_[] \$\$_[] \$\$_[] \$\$[] \$\$_[] \$\$_[] \$\$_[] \$\$_[] \$\$_[] \$\$[] \$\$[] \$\$[] \$\$[] \$\$[] \$\$[] \$[] \$[] \$[] \$[] \$[] \$[] \$[] \$[] \$[] \$[] \$[] \$[] \$[] \$[] \$[] \$
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Indicate below the amount of the adjusted gross proceeds to the issuer us posed to be used for each of the purposes shown. If the amount for any not known, furnish an estimate and check the box to the left of the estimate all of the payments listed must equal the adjusted gross proceeds to the is forth in response to Part C - Question 4.b above.  Salaries and fees  Purchase of real estate  Purchase, rental or leasing and installation of machinery and equipment  Construction or leasing of plant buildings and facilities.  Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)  Repayment of indebtedness	sed or purpose te. The ssuer  Payments to Officers, Payments Directors, & To Affiliates Others  [] [] [] \$\$ [] \$
ference is the "adjusted gross proceeds to the issuer."	sed or purpose te. The ssuer  Payments to Officers, Payment Directors, & To Affiliates Others  [] [] [] [] [] [] [] [] [] [] [] [] [] [

Column Totals .....

Lualland an andemhuelfarmelfarme htm

Total Payments Listed (column totals added) .....

#### D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)

Lexus Energy Group, Inc.

Name of Signer (Print or Type)

Joe A. Wells

Signaturé

7-17-02

Signaturé

7-17-02

Signaturé

7-17-02

Signer (Print or Type)

### **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

## E. STATE SIGNATURE

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)

Lexus Energy Group, Inc.
Name of Signer (Print or Type)

Joe A. Wells

gnatura / Date

Title (Print or Type)

Senior Vice President

# Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	APPENDIX									
1	Intend to non-ac investors (Part B-	to sell ccredited in State	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors		Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ							200			
AR										
CA										
co	Х		J.V.interest	s unk.	unk.	unk.	unk	N/A	N/A	
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http://www.sec.gov/smbus/forms/d.htm Last update: 08/27/1999

Return to Small Business Information page

Return to the SEC Home page